METHAMPHETAMINE

Community Drug Alert Bulletin



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Methamphetamine is...

- A powerfully addictive stimulant that dramatically affects many areas of the central nervous system. The drug can easily be made in clandestine laboratories from relatively inexpensive over-the-counter ingredients and can be purchased at a relatively low cost. These factors make methamphetamine a drug with a high potential for widespread abuse.
- Sometimes referred to as "speed," "meth," and "chalk." In its smoked form it is often referred to as "ice," "crystal," "crank," and "glass."
- Comes in many forms and can be smoked, snorted, injected or orally ingested.
- A white, odorless, bitter tasting crystalline powder that can be easily dissolved in water or alcohol.

Populations using methamphetamine...

- Traditionally associated with white, male, blue-collar workers, is now reportedly being used by diverse groups in all regions of the country.
- Use is increasing among men who have sex with men and use other drugs, making this population more vulnerable to contracting and spreading sexually transmitted diseases, especially HIV/AIDS.
- Young adults who attend "raves" or private clubs also are increasingly using methamphetamine.
- Include notable increases among homeless and runaway youth.
- Increasing use of methamphetamine is reported among male and female commercial sex workers who also trade sex for drugs and among members of motorcycle gangs. Also, people in occupations (such as long-haul truckers) that demand long hours, mental alertness, and physical endurance, have been using this drug at increased rates.

New trends in methamphetamine use...

- There is emerging evidence that methamphetamine is being administered increasingly via the intravenous route. Injecting this drug puts the user at increased risk for engaging in behaviors (both sexual and non-sexual) that could increase his/her chance of contracting HIV/AIDS, hepatitis, and other infectious diseases
- Methamphetamine is not usually sold and bought on the streets like many of
 the other known illicit drugs. Users report that they obtain their supplies of
 methamphetamine from friends and acquaintances. It is typically a more
 closed or hidden sale, prearranged by "networking" with those producing the
 drug. Often it is sold "by invitation only" at all-night warehouse parties or
 "raves"
- Because methamphetamine can be made with readily available inexpensive
 materials, there is great variation in the processes and chemicals used. This
 means that the final product that is sold as "methamphetamine" may not be
 methamphetamine at all, but rather a highly altered chemical mixture with
 some stimulant-like effects. Uncertainties about the drug's sources and the
 pharmacological agents used in its production make it especially difficult to
 determine its toxicity, and resulting consequences and symptoms.
- Methamphetamine is often being used in dangerous combination with other substances, including cocaine/crack, marijuana, heroin, and alcohol.
- Long reported as the dominant drug problem in the San Diego, California, area, methamphetamine has become a substantial drug problem in other sections of the West and southwest as well. The drug has now been reported in both rural and urban areas of the South and Midwest. It is emerging in major urban areas in the East, but not to the extent seen in other regions of the country.

You can identify methamphetamine users by...

• Signs of agitation, excited speech, have decreased appetites, and increased physical activity levels. Other common symptoms include: dilated pupils, high blood pressure, irregular heartbeat, chest pain, shortness of breath, nausea and vomiting, diarrhea, and elevated body temperature.

- Occasional episodes of sudden and violent behavior, intense paranoia, visual and auditory hallucinations, and bouts of insomnia.
- A tendency to compulsively clean and groom and repetitively sort and disassemble objects, such as cars and other mechanical devices.

Preventing methamphetamine use...

- Effective prevention begins with an assessment of the specific nature of the drug problem within the local community and adapting the program accordingly. This could be assessed by looking at a variety of indicators including drug treatment and emergency room admissions.
- In general, prevention programs should start early, be comprehensive, and repetitively stress key points.
- Family-focused prevention efforts have been found to have a greater impact than strategies that focus on parents only or children/adolescents only.
- The general prevention principles established in NIDA's research-based booklet entitled "Preventing Drug Use Among Children and Adolescents" hold for all drugs of abuse, including methamphetamine, and serve as a good starting point for establishing programs in your community. (Call 1-800-729-6686 for a free copy)

Treating methamphetamine addiction...

- Several cognitive behavioral interventions designed to help modify a
 patient's thinking and behaviors, and to increase skills in coping with various
 life stresses, have been found to be effective.
- Unfortunately, there are currently no medications available to treat addiction or overdose to amphetamine or amphetamine-like drugs such as methamphetamine.
- Withdrawal from methamphetamine is typically characterized by drug craving, depressed mood, disturbed sleep patterns, and increased appetite. Antidepressant medications can be prescribed to combat the depressive symptoms frequently seen in methamphetamine withdrawal.

To get more information...

- Contact the California Department of Alcohol and Drug Programs' Resource Center (1-800-879-2772) to obtain a catalog of free publications relating to alcohol and other drugs, including methamphetamine.
- Contact the National Clearinghouse for Alcohol and Drug Information (NCADI) at 1-800-729-6686 for free NIDA publications. NIDA publications particularly relevant to this topic include Methamphetamine Research Report Series, NIDA Infofax on Methamphetamine, and NIDA Notes. For children, NIDA's Mind Over Matter series is recommended.